



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
American Dietetic Association Political Action Committee

Report Covering the Period: From: 

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		25677.54
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	37997.16									
(c) Total Receipts (from Line 19) .....	20669.26	233060.92								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	58666.42	258738.46								
7. Total Disbursements (from Line 31) .....	3997.31	204069.35								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	54669.11	54669.11								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
American Dietetic Association Political Action Committee

Report Covering the Period: From: 

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	5455.00	34973.00
(i) Itemized (use Schedule A) .....	15214.26	198087.92
(ii) Unitemized .....	20669.26	233060.92
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	20669.26	233060.92
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	20669.26	233060.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	20669.26	233060.92

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1497.31	100579.35
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	1497.31	100579.35
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	103400.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	90.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	90.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	3997.31	204069.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3997.31	204069.35

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	20669.26	233060.92
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	90.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	20669.26	232970.92
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1497.31	100579.35
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1497.31	100579.35

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 23  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
American Dietetic Association Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Nancy Rae Banda

Mailing Address 22960 Pavla Ct

City State Zip Code  
Wildomar CA 92595-9519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Riverside County Reg Med Cntr RD

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 302.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 0 / 2 0 0 8

**Transaction ID:** 81203.C93571

Amount of Each Receipt this Period  
52.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Nancy Rae Banda

Mailing Address 22960 Pavla Ct

City State Zip Code  
Wildomar CA 92595-9519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Riverside County Reg Med Cntr RD

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 327.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 1 2 / 2 0 0 8

**Transaction ID:** 81203.C93748

Amount of Each Receipt this Period  
25.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Karen T Bellesky

Mailing Address Apt 906  
4000 N Charles St

City State Zip Code  
Baltimore MD 21218-1762

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Chase Brexton REGISTERED DIETITIAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 1 2 / 2 0 0 8

**Transaction ID:** 81203.C93750

Amount of Each Receipt this Period  
25.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **102.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 23  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
American Dietetic Association Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Ethan A Bergman

Mailing Address 1010 E 3rd Ave

City State Zip Code  
Ellensburg WA 98926-3523

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Central Washington University Associate Dean & Professor, Co

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 8

Transaction ID: 81203.C93875

Amount of Each Receipt this Period  
100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Jeanne Blankenship

Mailing Address 6231 Jack Frost Ct

City State Zip Code  
Rocklin CA 95765-4234

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
University of CA, Davis RD

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 0 8

Transaction ID: 81203.C93526

Amount of Each Receipt this Period  
25.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Jeanne Blankenship

Mailing Address 6231 Jack Frost Ct

City State Zip Code  
Rocklin CA 95765-4234

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
University of CA, Davis RD

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 8

Transaction ID: 81203.C93866

Amount of Each Receipt this Period  
40.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **165.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 23  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
American Dietetic Association Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
J. Craig Busey

Mailing Address Ste 2000  
120 S. Riverside Plz

City State Zip Code  
Chicago IL 60606-3913

FEC ID number of contributing federal political committee. **C**

Name of Employer ADA Occupation Coporate lawyer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
11 / 10 / 2008

Transaction ID: 81203.C93640

Amount of Each Receipt this Period  
100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Barbara M Chrisley

Mailing Address 6036 Oakview Ave

City State Zip Code  
Dublin VA 24084-2249

FEC ID number of contributing federal political committee. **C**

Name of Employer NEW RIVER COMM SERVICES Occupation CLINICAL DIETITIAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
10 / 28 / 2008

Transaction ID: 81203.C93542

Amount of Each Receipt this Period  
250.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Sonja L Connor

Mailing Address Oregon Health & Science University  
3181 Sw Sam Jackson Park Rd

City State Zip Code  
Portland OR 97239-3011

FEC ID number of contributing federal political committee. **C**

Name of Employer Oregon Health & Science Univ Occupation Research Associate Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1020.00

Date of Receipt  
MM / DD / YYYY  
11 / 12 / 2008

Transaction ID: 81203.C93733

Amount of Each Receipt this Period  
20.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **370.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 23  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Dietetic Association Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Suzanne C Cryst

Mailing Address 430 Acorn Dr

City State Zip Code  
Dayton OH 45419-3904

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A @ PRESENT RD

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 302.00

Date of Receipt  
MM / DD / YYYY  
11 / 12 / 2008

**Transaction ID:** 81203.C93675

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Virginia J Dantone-debarbieris

Mailing Address 112 River Oaks Dr

City State Zip Code  
La Place LA 70068-7100

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Nutrition Education Resources President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
MM / DD / YYYY  
11 / 10 / 2008

**Transaction ID:** 81203.C93658

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Connie B Diekman

Mailing Address 344 Elm Valley Dr

City State Zip Code  
Webster Grvs MO 63119-4572

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Washington Univ.--St. Louis Director, University Nutrition

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt  
MM / DD / YYYY  
11 / 13 / 2008

**Transaction ID:** 81203.C93876

Amount of Each Receipt this Period  
250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1350.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Dietetic Association Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mary P Fuhrman	Date of Receipt MM / DD / YYYY 10 / 23 / 2008
	Mailing Address 1932 Prospector Ridge Dr	<b>Transaction ID:</b> 81203.C94055
	City State Zip Code Ballwin MO 63011-4808	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Coram, Inc. Occupation Chair of Dietetics Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 450.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mary P Fuhrman	Date of Receipt MM / DD / YYYY 11 / 21 / 2008
	Mailing Address 1932 Prospector Ridge Dr	<b>Transaction ID:</b> 81203.C93935
	City State Zip Code Ballwin MO 63011-4808	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Coram, Inc. Occupation Chair of Dietetics Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Margaret P Garner	Date of Receipt MM / DD / YYYY 11 / 10 / 2008
	Mailing Address 9 Dunbrook	<b>Transaction ID:</b> 81203.C93655
	City State Zip Code Tuscaloosa AL 35406	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer University of Alabama - Birmin Occupation Associate Professor Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	200.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 23  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
American Dietetic Association Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Lisa Gibson

Mailing Address 11 Quebrada

City Irvine State CA Zip Code 92620-1867

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation RD

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 11 / 10 / 2008  
**Transaction ID:** 81203.C93618  
 Amount of Each Receipt this Period 100.00  
 Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Irma G Gutierrez

Mailing Address 172 Prairie Springs Loop

City Georgetown State TX Zip Code 78626-4783

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A @ PRESENT Occupation RD

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 10 / 23 / 2008  
**Transaction ID:** 81203.C94043  
 Amount of Each Receipt this Period 25.00  
 Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Irma G Gutierrez

Mailing Address 172 Prairie Springs Loop

City Georgetown State TX Zip Code 78626-4783

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A @ PRESENT Occupation RD

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 21 / 2008  
**Transaction ID:** 81203.C93928  
 Amount of Each Receipt this Period 25.00  
 Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 150.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 23  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Dietetic Association Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Mary H Hager

Mailing Address 1514 17th Street Northwest  
#514

City State Zip Code  
Washington DC 20036-3989

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
American Dietetic Association Dir. Manager, Reg. Issues

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
11 / 10 / 2008

**Transaction ID:** 81203.C93641

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Lorri Holzberg

Mailing Address 2407 Sharon Rd

City State Zip Code  
Menlo Park CA 94025-6800

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
CAMINO MEDICAL GROUP RD

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
11 / 12 / 2008

**Transaction ID:** 81203.C93670

Amount of Each Receipt this Period  
100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Lorri Holzberg

Mailing Address 2407 Sharon Rd

City State Zip Code  
Menlo Park CA 94025-6800

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
CAMINO MEDICAL GROUP RD

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
425.00

Date of Receipt  
MM / DD / YYYY  
11 / 12 / 2008

**Transaction ID:** 81203.C93725

Amount of Each Receipt this Period  
25.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **225.00**

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 23  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
American Dietetic Association Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Carla S Honselman

Mailing Address 317 E 1700th Rd

City State Zip Code  
Casey IL 62420-3028

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A @ PRESENT RD

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
MM / DD / YYYY  
11 / 10 / 2008

**Transaction ID:** 81203.C93648

Amount of Each Receipt this Period  
25.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Monica L Hunsberger

Mailing Address 5045 Ne Mallory Ave

City State Zip Code  
Portland OR 97211

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
PORTLAND COMM COLLEGE Lecturer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
11 / 12 / 2008

**Transaction ID:** 81203.C93665

Amount of Each Receipt this Period  
100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Kendra K Kattelman

Mailing Address 9866 Washington St

City State Zip Code  
Tacoma WA 98433-1412

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SD State University RD

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
11 / 10 / 2008

**Transaction ID:** 81203.C93651

Amount of Each Receipt this Period  
100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **225.00**

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 23
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
American Dietetic Association Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Susan H Konek	Date of Receipt MM / DD / YYYY 11 / 12 / 2008
	Mailing Address 623 Haverhill Rd	<b>Transaction ID:</b> 81203.C93696
	City State Zip Code Wilmington DE 19803-2402	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation CHILDRENS HOSPITAL RD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Donna W Lockner	Date of Receipt MM / DD / YYYY 11 / 12 / 2008
	Mailing Address 3915 Calle Pino Ne	<b>Transaction ID:</b> 81203.C93669
	City State Zip Code Albuquerque NM 87111-4344	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation UNIVERSITY OF NEW MEXICO DIETITIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Patricia A Mcknight	Date of Receipt MM / DD / YYYY 11 / 10 / 2008
	Mailing Address 322 Naiche Ct	<b>Transaction ID:</b> 81203.C93627
	City State Zip Code Columbus OH 43213-3507	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Mt. Carmel College of Nursing Adjunct Faculty	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	400.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 23

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
American Dietetic Association Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Debra W Morrison

Mailing Address 700 County Road 278

City State Zip Code  
Cullman AL 35057-4831

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 100.00

Date of Receipt

MM / DD / YYYY  
11 / 10 / 2008

Transaction ID: 81203.C93646

Amount of Each Receipt this Period

100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)

Debra W Morrison

Mailing Address 700 County Road 278

City State Zip Code  
Cullman AL 35057-4831

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 200.00

Date of Receipt

MM / DD / YYYY  
11 / 12 / 2008

Transaction ID: 81203.C93709

Amount of Each Receipt this Period

100.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)

Teresa A Nece

Mailing Address 7071 Oak Brook Dr

City State Zip Code  
Urbandale IA 50322-4800

FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested Occupation Information Requested  
Des Moines Public Schools DIR OF FOOD SERVICES

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

MM / DD / YYYY  
11 / 10 / 2008

Transaction ID: 81203.C93631

Amount of Each Receipt this Period

250.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

450.00

**TOTAL** This Period (last page this line number only) .....

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 23

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
American Dietetic Association Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Jessie M Pavlinac

Mailing Address 13147 Century Dr

City State Zip Code  
Oregon City OR 97045-6700

FEC ID number of contributing federal political committee. C

Name of Employer  
N/A @ PRESENT

Occupation  
Clinical Nutrition Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
950.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 23 / 2008

**Transaction ID:** 81203.C94045

Amount of Each Receipt this Period  
50.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Jessie M Pavlinac

Mailing Address 13147 Century Dr

City State Zip Code  
Oregon City OR 97045-6700

FEC ID number of contributing federal political committee. C

Name of Employer  
N/A @ PRESENT

Occupation  
Clinical Nutrition Manager

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 21 / 2008

**Transaction ID:** 81203.C93931

Amount of Each Receipt this Period  
50.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Sandra M Pechous

Mailing Address 4627 Grand Ave

City State Zip Code  
Western Springs IL 60558-1548

FEC ID number of contributing federal political committee. C

Name of Employer  
SELF EMPLOYED

Occupation  
RD

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 20 / 2008

**Transaction ID:** 81203.C93572

Amount of Each Receipt this Period  
100.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... 200.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 23  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Dietetic Association Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Mary Pat Raimondi

Mailing Address 1895 Lincoln Ave

City State Zip Code  
Saint Paul MN 55105-1422

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED      Occupation Partner

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      203.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	2	/	2	0	0	8

**Transaction ID:** 81203.C93770

Amount of Each Receipt this Period  
3.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Juliana Smith

Mailing Address 1120 Connecticut Ave NW  
Suite 480

City State Zip Code  
Washington DC 20036-3905

FEC ID number of contributing federal political committee. **C**

Name of Employer American Dietetic Assn      Occupation Director

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	2	/	2	0	0	8

**Transaction ID:** 81203.C93778

Amount of Each Receipt this Period  
250.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Kay S Soltesz

Mailing Address 15040 N River Rd

City State Zip Code  
Pemberville OH 43450-9898

FEC ID number of contributing federal political committee. **C**

Name of Employer Bluffton University      Occupation RD

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      265.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	2	/	2	0	0	8

**Transaction ID:** 81203.C93721

Amount of Each Receipt this Period  
15.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **268.00**

**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 23  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
American Dietetic Association Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Toni M Tucker

Mailing Address 12735 Purdham Dr

City State Zip Code  
Woodbridge VA 22192-6478

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Spectrum Health care RD

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
MM / DD / YYYY  
11 / 13 / 2008

Transaction ID: 81203.C93872

Amount of Each Receipt this Period  
100.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
Mary L Watts

Mailing Address 3462-a1 S. Stafford St.

City State Zip Code  
Arlington VA 22206-1939

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
American Nutrition Society Director

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
11 / 10 / 2008

Transaction ID: 81203.C93625

Amount of Each Receipt this Period  
125.00

Receipt

**C.**

Full Name (Last, First, Middle Initial)  
Jennifer A Weber

Mailing Address 4819 1st St S

City State Zip Code  
Arlington VA 22204-1315

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
American Dietetic Association Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
MM / DD / YYYY  
10 / 23 / 2008

Transaction ID: 81203.C94044

Amount of Each Receipt this Period  
25.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 250.00

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 23  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
American Dietetic Association Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Jennifer A Weber

Mailing Address 4819 1st St S

City State Zip Code  
Arlington VA 22204-1315

FEC ID number of contributing federal political committee. **C**

Name of Employer American Dietetic Association Occupation Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 21 / 2008  
Transaction ID: 81203.C93929  
Amount of Each Receipt this Period 25.00  
Receipt

**B.** Full Name (Last, First, Middle Initial)  
Mary Suzy K Weems

Mailing Address 1109 Castle Bluff Circle

City State Zip Code  
Waco, TX 76712

FEC ID number of contributing federal political committee. **C**

Name of Employer Baylor University Occupation Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt 11 / 12 / 2008  
Transaction ID: 81203.C93684  
Amount of Each Receipt this Period 25.00  
Receipt

**C.** Full Name (Last, First, Middle Initial)  
Jane V White

Mailing Address Department of Family Medicine  
1924 Alcoa Hwy

City State Zip Code  
Knoxville TN 37920

FEC ID number of contributing federal political committee. **C**

Name of Employer UNIVERSITY OF TENNESSEE Occupation Professor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 12 / 2008  
Transaction ID: 81203.C93771  
Amount of Each Receipt this Period 100.00  
Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► 150.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 23  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Dietetic Association Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Anne M Wolf

Mailing Address 5030 Rutherford Rd

City State Zip Code  
Charlottesville VA 22901-5633

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
N/A @ PRESENT RD

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
11 / 10 / 2008

**Transaction ID:** 81203.C93610

Amount of Each Receipt this Period  
250.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Cynthia A Wolfram

Mailing Address 4507 Apollo St

City State Zip Code  
Houston TX 77018-3205

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Skilled Healthcare LLC DIRECTOR OF DIETARY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
MM / DD / YYYY  
11 / 10 / 2008

**Transaction ID:** 81203.C93637

Amount of Each Receipt this Period  
700.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) ..... ► **950.00**

**TOTAL** This Period (last page this line number only) ..... ► **5455.00**

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
American Dietetic Association Political Action Committee

A.	Full Name (Last, First, Middle Initial) American Dietetic Association	Transaction ID: 81203.E1974 Date of Disbursement 11 / 14 / 2008
	Mailing Address 120 S Riverside Plz Suite 2000	Amount of Each Disbursement this Period 900.00
	City Chicago State IL Zip Code 60606-3913	
	Purpose of Disbursement PAC Software Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAC SOFTWARE

B.	Full Name (Last, First, Middle Initial) Printing & Copying Huff	Transaction ID: 81203.E1975 Date of Disbursement 11 / 19 / 2008
	Mailing Address 1100 17th St NW	Amount of Each Disbursement this Period 185.06
	City Washington State DC Zip Code 20036-4609	
	Purpose of Disbursement ADAPAC stationary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		ADAPAC STATIONARY

C.	Full Name (Last, First, Middle Initial) U.S. Postal Service	Transaction ID: 81203.E1971 Date of Disbursement 11 / 10 / 2008
	Mailing Address 1050 Connecticut Ave NW	Amount of Each Disbursement this Period 195.00
	City Washington State DC Zip Code 20036-5308	
	Purpose of Disbursement PAC Monthly Mailings Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		PAC MONTHLY MAILINGS

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1280.06
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 23

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
American Dietetic Association Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) U.S. Postal Service <hr/> Mailing Address 1050 Connecticut Ave NW <hr/> City Washington State DC Zip Code 20036-5308 <hr/> Purpose of Disbursement ADAPAC Monthly Mailings Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81203.E1972 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 8
	Amount of Each Disbursement this Period 84.00 <hr/> ADAPAC MONTHLY MAILINGS
<b>B.</b> Full Name (Last, First, Middle Initial) Jennifer Teters <hr/> Mailing Address 11890 Robertson Farm Circle <hr/> City Fairfax State VA Zip Code 22030- <hr/> Purpose of Disbursement Copies- FNCE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 81203.E1969 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 8
	Amount of Each Disbursement this Period 133.25 <hr/> COPIES- FNCE

SUBTOTAL of Disbursements This Page (optional) .....

217.25

TOTAL This Period (last page this line number only) .....

1497.31

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
American Dietetic Association Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Johanns for U.S. Senate  Mailing Address 1201 O St Suite 101  City Lincoln State NE Zip Code 68508-1420  Purpose of Disbursement MIKE JOHANNNS (R-NE) Candidate Name MICHAEL O JOHANNNS Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 00 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81020.E1967 <b>Date of Disbursement</b> 10 / 20 / 2008  Amount of Each Disbursement this Period 1000.00  MIKE JOHANNNS (R-NE)	
<b>B.</b>	Full Name (Last, First, Middle Initial) Jeff Merkley for Oregon  Mailing Address P.O. Box 29136  City Portland State OR Zip Code 97296-  Purpose of Disbursement JEFF MERKLEY (D-OR) Candidate Name JEFFREY ALAN MERKLEY Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81020.E1968 <b>Date of Disbursement</b> 10 / 20 / 2008  Amount of Each Disbursement this Period 500.00  JEFF MERKLEY (D-OR)	
<b>C.</b>	Full Name (Last, First, Middle Initial) Linda Stender  Mailing Address P.O. Box 703  City Scotch Plains State NJ Zip Code 07076-  Purpose of Disbursement LINDA STENDER (D-NJ-7) Candidate Name LINDA MRS. STENDER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 81203.E1970 <b>Date of Disbursement</b> 10 / 29 / 2008  Amount of Each Disbursement this Period 1000.00  LINDA STENDER (D-NJ-7)	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<b>2500.00</b>	
<b>TOTAL</b> This Period (last page this line number only) .....		<b>2500.00</b>	